

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE  
 Commissioner for Patents  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 or Fax (703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

021323 7590 03/09/2005

TESTA, HURWITZ & THIBEAULT, LLP  
 HIGH STREET TOWER  
 125 HIGH STREET  
 BOSTON, MA 02110

05/03/2005 BABRAHAZ 00000055 09832466

01 FC:1501 1400.00 OP  
 02 FC:1504 300.00 OP



Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

## Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

(Depositor's name)

(Signature)

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/832,466	04/11/2001	Gerry Griffin	SRT-025	4530

TITLE OF INVENTION: APPARATUS AND METHOD FOR TWO COMPUTING ELEMENTS IN A FAULT-TOLERANT SERVER TO EXECUTE INSTRUCTIONS IN LOCKSTEP

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
-------------	--------------	-----------	-----------------	------------------	----------

nonprovisional	NO	\$1400	\$300	\$1700	06/09/2005
----------------	----	--------	-------	--------	------------

EXAMINER	ART UNIT	CLASS-SUBCLASS
----------	----------	----------------

CHU, GABRIEL L	2114	714-011000
----------------	------	------------

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	Kirkpatrick & Lockhart 1 Nicholson Graham, LLP 2 _____ 3 _____
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.		
<input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47, Rev. 03-02 or more recent) attached. Use of a Customer Number is required.		

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Stratus Technologies Bermuda Ltd.

Hamilton,  
Bermuda

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

4a. The following fee(s) are enclosed:

4b. Payment of Fee(s):

Issue Fee  
 Publication Fee (No small entity discount permitted)  
 Advance Order - # of Copies \_\_\_\_\_

A check in the amount of the fee(s) is enclosed.  
 Payment by credit card. Form PTO-2038 is attached.  
 The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-1721 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Date 4/29/05

Typed or printed name

Jason P. Fiorillo

Registration No. 52,892

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



# TRANSMITTAL FORM

	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Application Serial Number</td> <td style="width: 50%;">09/832,466</td> </tr> <tr> <td>Filing Date</td> <td>April 11, 2001</td> </tr> <tr> <td>First Named Inventor</td> <td>Griffin</td> </tr> <tr> <td>Group Art Unit</td> <td>2114</td> </tr> <tr> <td>Examiner Name</td> <td>Gabriel L. Chu</td> </tr> <tr> <td>Attorney Docket No.</td> <td>SRT-025</td> </tr> <tr> <td>Patent No.</td> <td>Not applicable</td> </tr> <tr> <td>Issue Date</td> <td>Not applicable</td> </tr> </table>	Application Serial Number	09/832,466	Filing Date	April 11, 2001	First Named Inventor	Griffin	Group Art Unit	2114	Examiner Name	Gabriel L. Chu	Attorney Docket No.	SRT-025	Patent No.	Not applicable	Issue Date	Not applicable
Application Serial Number	09/832,466																
Filing Date	April 11, 2001																
First Named Inventor	Griffin																
Group Art Unit	2114																
Examiner Name	Gabriel L. Chu																
Attorney Docket No.	SRT-025																
Patent No.	Not applicable																
Issue Date	Not applicable																

**ENCLOSURES (check all that apply)**

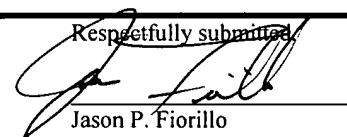
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Check Attached <input type="checkbox"/> Copy of Fee Transmittal Form	<input type="checkbox"/> Copy of Notice to File Missing Parts of Application <input type="checkbox"/> Formal Drawing(s)	<input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences <input type="checkbox"/> Appeal Brief (in triplicate)
<input type="checkbox"/> Amendment/Response <input type="checkbox"/> Preliminary <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets ____]	<input type="checkbox"/> Request For Continued Examination (RCE) Transmittal <input type="checkbox"/> Power of Attorney (Revocation of Prior Powers) <input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Status Inquiry <input checked="" type="checkbox"/> Return Receipt Postcard <input type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8 <input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8
<input type="checkbox"/> Petition for Extension of Time	<input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application	<input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below) <input checked="" type="checkbox"/> Form PTOL-85 and Copy of Form PTOL-85 <input checked="" type="checkbox"/> Check in the amount of \$1,700.00
<input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Form PTO-1449 <input type="checkbox"/> Copies of IDS Citations	<input type="checkbox"/> Small Entity Statement <input type="checkbox"/> CD(s) for large table or computer program	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Amendment After Allowance	
<input type="checkbox"/> Sequence Listing submission <input type="checkbox"/> Paper Copy/CD <input type="checkbox"/> Computer Readable Copy <input type="checkbox"/> Statement verifying identity of above	<input type="checkbox"/> Request for Certificate of Correction <input type="checkbox"/> Certificate of Correction (in duplicate)	

**CORRESPONDENCE ADDRESS**

Direct all correspondence to: Patent Administrator  
 Kirkpatrick & Lockhart Nicholson  
 Graham LLP  
 75 State Street  
 Boston, MA 02109-1808  
 Tel. No.: (617) 261-3100  
 Fax No.: (617) 261-3175

**SIGNATURE BLOCK**

Date: April 29, 2005  
 Reg. No. 52,892  
 Tel. No.: (617) 261-3186  
 Fax No.: (617) 261-3175

Respectfully submitted,  
  
 Jason P. Fiorillo  
 Attorney for Applicants  
 Kirkpatrick & Lockhart  
 Nicholson Graham LLP  
 75 State Street  
 Boston, MA 02109-1808